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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Lu et al. Art Unit: 2826
Serial No.: 10/722,013 Examiner: Erdem, F.
Filing Date: 11/25/2003 Docket No.: TI-35669
Customer No.: 23494 Conf. No.: 6979
Title: A CAPACITOR FORMED ON A RECRYSTALLIZED POLYSILICON LAYER
AND A METHOD OF MANUFACTURE THEREFOR

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following papers are being transmitted by facsimile to the
U.S. Patent and Trademark Office at 703-872-9306 on the date shown below:


Jacqueline J. Garner, Reg. No. 36,144

January 28, 2005
Date

FACSIMILE COVER SHEET

<input checked="" type="checkbox"/> FACSIMILE COVER SHEET	<input checked="" type="checkbox"/> AMENDMENT (8 Pages)
<input type="checkbox"/> NEW APPLICATION	<input checked="" type="checkbox"/> EOT 3mth (2 Pages)
<input type="checkbox"/> DECLARATION (# Pages)	<input type="checkbox"/> NOTICE OF APPEAL (# Pages)
<input type="checkbox"/> ASSIGNMENT (# Pages)	<input type="checkbox"/> APPEAL (# Pages)
<input type="checkbox"/> FORMAL DRAWINGS	<input type="checkbox"/> ISSUE FEE (# Pages)
<input type="checkbox"/> INFORMAL DRAWINGS	<input type="checkbox"/> REPLY BRIEF (IN TRIPLICATE) (# Pages)
<input type="checkbox"/> CONTINUATION APP'N (# Pages)	<input checked="" type="checkbox"/> Claim Fee (2 pages)
<input type="checkbox"/> DIVISIONAL APP'N	
NAME OF INVENTOR(S): Lu	
TITLE OF INVENTION: A Capacitor . . .	
TI FILE NO.: TI-35669	DEPOSIT ACCT. NO.: 20-0668
FAXED: 1/28/2005 DUE: 10/28/2004 ATTY/SECY: JJG	
RECEIPT DATE & SERIAL NO.: Serial No.: 10/722,013 Filing Date: 11/25/2003 Conf. No.: 6979	

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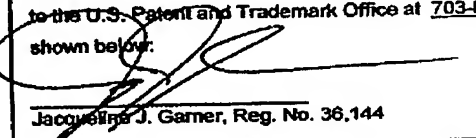
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Examiner: Erdem, F.
Docket No.: TI-35669
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Amendment Fee

Assistant Commissioner of Patents
P. O. Box 1450
Alexandria, VA 22313-1450
January 28, 2005

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 Jacqueline J. Garner, Reg. No. 36,144	January 28, 2005 Date

Dear Sir:

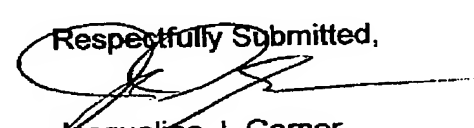
Transmitted herewith is an amendment in the above-identified Application. The Fee has been calculated as shown below.

CLAIMS AS AMENDED						
	Claims remaining after amendment		Highest Number Previously Paid for	Present Extra	Rate	Additional Fee
TOTAL	21	Minus	20	= 1	x \$50	\$ 50.00
Independent Claims	5	Minus	3	= 2	x \$200	\$ 400.00
Total Additional Fee for this Amendment						\$ 450.00

Charge the total additional fee, and any further fees, or credit any overpayment to Deposit Account No. 20-0668.

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Respectfully Submitted,


Jacqueline J. Garner
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